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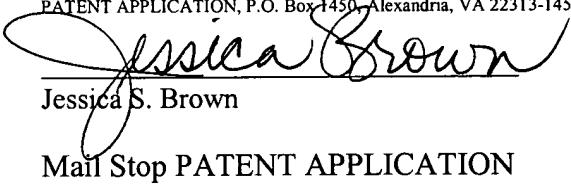
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February 26, 2004

I hereby certify that this correspondence and identified enclosures are being deposited on **February 26, 2004**, with the U.S. Postal Service, "Express Mail Post Office to Address" service, No. EV313250518US, under 37 C.F.R. § 1.10, addressed to the Commissioner for Patents, Mail Stop PATENT APPLICATION, P.O. Box 1450, Alexandria, VA 22313-1450.

  
Jessica S. Brown

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Re: Client: Alfred E. Mann Institute for Biomedical Engineering at the University of Southern California  
Matter No. 64693-094  
U.S. Patent Application  
Title: **IMPLANTABLE DEVICE WITH SENSORS FOR DIFFERENTIAL MONITORING OF INTERNAL CONDITION**  
Inventors: Ramez Emile Necola Shehada and Nicolas Jabbour  
Subject: Transmitting Patent Application for Filing

Dear Sir or Madam:

We enclose for filing the patent application of:

Inventors: Ramez Emile Necola Shehada and Nicolas Jabbour  
For: **IMPLANTABLE DEVICE WITH SENSORS FOR DIFFERENTIAL MONITORING OF INTERNAL CONDITION**

This applicant claims Small Entity Status. See 37 C.F.R. 1.27.

The application includes:

- Cover + 31 pages of specification, claims, and abstract

Commissioner for Patents

February 26, 2004

Page 2

*Seventeen (17)*

- ~~Sixteen (16)~~ sheet(s) of drawings (Figures 1-10)

The filing fee has been calculated as shown below:

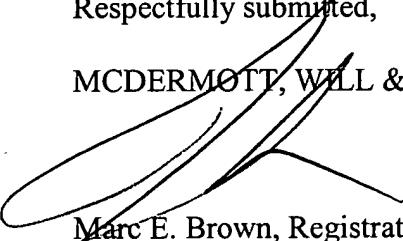
|                             | NO. OF CLAIMS |     | EXTRA CLAIMS | Small Entity RATE | AMOUNT          |
|-----------------------------|---------------|-----|--------------|-------------------|-----------------|
| Total Claims                | <u>76</u>     | -20 | <u>56</u>    | \$9.00            | <u>\$504.</u>   |
| Independent Claims          | <u>7</u>      | -3  | <u>4</u>     | \$43.00           | <u>\$172.</u>   |
| Multiple Dependent Claim(s) |               |     |              |                   | <u>\$145.00</u> |
| Basic Fee                   |               |     |              |                   | \$385.          |
| Total of Above Calculations |               |     |              |                   | <u>\$821.</u>   |
| Total Fee                   |               |     |              |                   | <u>\$821.</u>   |

- Please charge my Deposit Account No. 501946 in the amount of \$821.00, and reference attorney docket number 64693-094. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 501946. A duplicate copy is enclosed.
- Any additional filing fees required under 37 CFR 1.16.
- The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 510946. A duplicate copy of this sheet is enclosed.
- Any patent application processing fees under 37 CFR 1.17.
- Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Please stamp the filing date on the enclosed postcard and return it to us.

Respectfully submitted,

MCDERMOTT, WILL & EMERY



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**Date: February 26, 2004**